APF Employee UFM Consent/Declination Statement

Notice to Employees: This statement provides the means by which you can volunteer to accept conversion from APF to NAF status. You must complete this form volunteering to convert in order for your conversion to take place. This form will be made a part of your permanent Official Personnel (OPF) file if you agree to convert. You may also use this form to indicate in writing that you decline the offer to convert at this time. You are under no obligation to sign this form if you do not want to convert, and nothing will happen to you if you choose not to sign this form declining conversion. If you do sign this form declining conversion, it will be placed in your OPF as a record of your declination, and will remain there until you leave your current position or later change your mind and decide to convert.

l,			
	(Print Full Name)		
(<i>P</i>	APF Position Grade, Series and Position Title	··)	
Funding and Nonnection will service en Fund (NAF) e	that I have been informed about and underst Management (UFM) throughout Morale Welfa th implementation of this program, I understamployee in my current position, or converting mployee in my current position. (Check a bound sign below)	are and Recreation at my insta and that I have the option of ei voluntarily to the status of a I	allation. In ther remaining a Nonappropriated
	I hereby voluntarily request that I be converted from Appropriated Fund to Nonappropriated Fund status in my current position. I make this choice freely and attest that I have not been forced or coerced in any way to make this decision. I have been informed about my pay, benefits and entitlements and what will happen to them on my conversion to NAF. I realize that in connection with this conversion I will be required to make an irrevocable election of retirement system in which I will participate for the remainder of my future federal employment as either a civil service (APF) or NAF employee.		
	I hereby decline the offer to convert from APF to NAF status at this time. I understand that I may remain in my current APF position indefinitely until I choose to vacate the position voluntarily or until the Army determines there is no longer a valid requirement for the position. I understand that I may change my mind at any time in the future and voluntarily agree to convert to NAF, and that this declination will not adversely affect my ability to voluntarily convert at that time.		
_	Employee Signature	- <u></u> -	Date
	Human Resources Specialist Signature	- <u></u> Γ	 Date